

PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docking Number

10/809974**APPLICATION AS FILED - PART I**

(Column 1)		(Column 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (u), or (v))							
SEARCH FEE (37 CFR 1.16(a), (i), or (ii))							
EXAMINATION FEE (37 CFR 1.16(a), (u), or (v))							
TOTAL CLAIMS (37 CFR 1.16(i))		minus 20 = *	x 25 =		OR	x 50 =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))		minus 3 = *	x 100 =			x 200 =	
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							
* If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL			TOTAL	

APPLICATION AS AMENDED - PART II

AMENDMENT A	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Total (37 CFR 1.16(h))	<u>21</u>	minus **	<u>40</u>	x 25 =		OR	x 50 =	
Independent (37 CFR 1.16(h))	<u>3</u>	minus ***	<u>3</u>	x 100 =			x 200 =	
Application Size Fee (37 CFR 1.16(s))								
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (37 CFR 1.16(j))								
TOTAL ADD'L FEE						OR	TOTAL ADD'L FEE	

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Total (37 CFR 1.16(h))	<u>21</u>	minus **	<u>40</u>	x 25 =		OR	x 50 =	
Independent (37 CFR 1.16(h))	<u>3</u>	minus ***	<u>3</u>	x 100 =			x 200 =	
Application Size Fee (37 CFR 1.16(s))								
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (37 CFR 1.16(j))								
TOTAL ADD'L FEE						OR	TOTAL ADD'L FEE	

The collection of information is required by 37 CFR 1.16. The information is required for claim or claimant a benefit by the public which is to be paid by the USPTO to process an application. Confidentiality is governed by 37 CFR 1.12 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application to the USPTO. Time will vary depending upon the individual's use. Any comments on the amount of time you to provide to complete this form and the suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

For more information, see the USPTO website at www.uspto.gov and select "patent".

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/809974
67,200-1258

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	40	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	40 minus 20 =	20
INDEPENDENT CLAIMS	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	•	Minus	**
Independent	•	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	•	Minus	**
Independent	•	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	•	Minus	**
Independent	•	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
X\$ 9=	
X43=	
+145=	
TOTAL	

RATE	FEE
BASIC FEE	770.00
X\$18=	360
X86=	
+290=	
TOTAL	1130

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL ADDIT. FEE	